

Freedom Credit Union

Authorization for Payoff / Payoff Request

Financial Institution Receiving Payoff

Name	
Address	
City, State, Zip	

Borrower Information

Name(s)	
Address	
City, State, Zip	
Account Number	

Vehicle Information

Year	
Make and Model	
VIN	

By signing below, I/we authorize the financial institution named above to provide payoff information to and accept payment in full from Freedom Credit Union for the loan listed above, and instruct the financial institution to remit the certificate of title to:

Freedom Credit Union
Attn: Titles
815 N Freedom Blvd
Provo, UT 84604
801-375-2120

Signature: _____

Date: _____

Signature: _____

Date: _____